

730 Topeka  
P.O. Box 287  
Lyndon, KS 66451-0287  
Phone: 785 828-3146

CITY OF LYNDON, KANSAS  
ACCESSORY BUILDING PERMIT

Fee: \$25.00

Date Paid: \_\_\_\_\_

**NOTICE:** There is a mandatory **10-day waiting period** from the date of approval.  
Do not begin any construction or installing of any structure until that time.

1. Property Owner \_\_\_\_\_
2. Address \_\_\_\_\_
3. Legal Description \_\_\_\_\_
4. Description and Location of Structure: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Yes    No

5. Site sketch attached (required) ☐ ☐
6. ADJACENT LAND USE:  
North \_\_\_\_\_  
South \_\_\_\_\_  
East \_\_\_\_\_  
West \_\_\_\_\_

7. Present Use of Property: \_\_\_\_\_

**APPLICANT PLEASE READ**

I hereby certify that I have read and examined this application and know the same to be true and correct. **I hereby certify that I have been authorized by the owner to act as his/her agent in applying for and obtaining this permit prior to work being initiated.** All provisions of laws and ordinances governing this type of work will be complied with, whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**NOTE:** This application (if approved) expires **one year** after date of issuance unless the project is started within six months of approval.

**IF APPLICATION IS NOT APPROVED:**

- You have the right to file a request for a hearing before the Board of Zoning Appeals.
- See Article 12, or contact the City Clerk's Office for procedure.
- Request must be made within thirty (30) days of being disapproved.

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≈ BELOW SECTION FOR CITY USE ONLY ≈

Zoning \_\_\_\_\_ Occupancy \_\_\_\_\_ Floodplain \_\_\_\_\_ ADA \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_

Comments of Zoning Administrator: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

Signed: \_\_\_\_\_

Zoning Administrator